# Yuba County Children and Families Commission

# Strategic Plan Update

**June 2004** 

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### Acknowledgements

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### Meeting space was generously provided by:

- Yuba County Health and Human Services Department
- Marysville Joint Unified School District
- Yuba County Library
- Yuba County Board of Supervisors

# The Yuba County Children and Families Commission and Advisory Committee would like to extend a special Thank You to the following individuals:

- Sheli Beach, Advisory Committee Chair 03-04
- Brenda Odesha, Advisory Committee Vice-Chair/Acting Chair 03-04
- Evelyn Joslin, Executive Director
- Rita Beisley, Administrative Assistant
- Heather Warner, Office Assistant

### Introduction

The Yuba County Children and Families Commission (YCCFC) was formed in January 1999 to implement the 1998 Proposition 10 California Children and Families Act. Since its inception, the YCCFC has been committed to improving the status of Yuba County children aged zero to five years old and their families. During the YCCFC formation years of 1999-2000, and 2000-2001, the Vision Statement, the Mission Statement, and the statement of Purpose, which are shown in the sections immediately following this one, were developed and adopted, along with the original Strategic Plan, which is discussed later in this document. This document presents the revisions to the Strategic Plan made in 2003-2004 for implementation in 2004-2005.

### Vision

All Yuba County children age prenatal through five (5) years old will thrive in supportive, nurturing, and loving environments, enter school healthy, and will become productive, well-adjusted members of society.

### Mission

It is recognized that early childhood development is especially critical to the overall growth, development, and well being of our children. It is therefore our Mission to ensure that programs and services that enhance the early childhood development of Yuba County children are universally available and accessible to all our children. Proper parenting, nurturing, and health care, from prenatal care until the beginning of kindergarten, will provide the means for Yuba County's children to enter school in good health, ready and able to learn, and emotionally well developed.

The Yuba County Children and Families Commission will facilitate the creation and implementation of an integrated, comprehensive, and collaborative system of services and information to enhance optimal early child development. This system will function as a network that promotes accessibility to all services and information from any entry point into the system. It is further the intent of the Commission to emphasize local decision-making based on a diverse community, to provide for greater local flexibility and sensitivity in designing delivery systems, and to eliminate duplicate administrative systems.

### **Purpose**

- 1. To provide local leadership in attaining the statewide goals of the California First 5 Commission (or State Commission).
- 2. To administer Yuba County's use of Proposition 10 tax revenues received by the County.
- 3. To ensure that Proposition 10 revenues are spent on behalf of children aged 0 to 5 and their families.

- 4. To ensure that Proposition 10 tax revenues are spent to attain some or all of the broad strategic results specified in the state statute and in policies published by the State Commission as follows:
  - a. Improved Systems for Families,
  - b. Improved Family Functioning: Strong Families,
  - c. Improved Child Development: Children Learning and Ready for School, and
  - d. Improved Child Health: Children are Healthy.
  - e. Improved School Readiness: Children Ready to Enter Kindergarten, added by California First Five in 2001
- 5. To ensure that Proposition 10 funded programs address some or all State Commission specified focus areas as follows:
  - a. Parent Education and Support Services,
  - b. Child Care and Early Education, and
  - c. Child Health and Wellness.
- 6. To ensure that all community services to children 0 to 5 and their families are integrated, coordinated, accessible, and culturally relevant.
- 7. To promote the broadest possible community input, including input from those most affected (i.e., parents of children 0 to 5, to the planning, development, and implementation of Proposition 10 funded programs).
- 8. To promote the development of parents as leaders and advocates, and to promote an asset-based approach to the development of neighborhoods and communities.
- 9. To ensure that outcomes in Proposition 10 funded programs are measurable, and that appropriate standards of evaluation are applied.
- 10. To contribute to the statewide body of knowledge concerning effective programs to promote strong families, child readiness for school, and child health.

# Summary of Strategic Plans and Activities Since Implementation Began in 2001

Following a lengthy period of research and community assessment during 1999 and 2000, the YCCFC published the original Yuba County Children and Families Commission Strategic Plan in July of 2000. The original strategic plan was revised in 2001-02, for use in 2002-2003 and revised again in 2002-03, for use in 2003-04. All three of the past plans are available for review in the Commission office.

### The Original 1999-2000 Plan as Implemented in 2001-2002

- When implementation began in May of 2001, the original strategic plan mentioned above provided a very specific guide for the strategies and types of programs which would be implemented to address state goals. The plan focused first on enhancing the existing family resource centers, and adding additional family resource centers, and it provided a specific model, based upon the Cal SAHF model, for these programs, and detailed the types of additional support staff to be funded, etc. The 2000 plan was also very specific about the type of transitional housing program which would be funded, i.e., separate housing units suitable for a family were to be established, and the housing was to be used by families with children 0-5 in which one or more of the parents was in recovery from substance abuse, but continuing in treatment, and continuing to need some supervision from an agency with expertise in substance abuse treatment while resuming family life. The 2000 Plan also specified that promotion of the use of breast feeding, as well as direct support and consultation services to breastfeeding mothers of newborns would be developed, that a variety of approaches would be used to improve the quality as well as increase the quantity of child care spaces available throughout the community, and that a mini-grants program for community improvement efforts would be established to encourage parents to work together at a neighborhood level to enhance the health and safety of children 0-5. All of these strategies were implemented during 2001-02, and awards were made and service contracts were established. Harmony Health established a new family resource center, and began providing the breastfeeding support and promotion services. The Camptonville Resource Center, and the Yuba County Office of Education (YCOE) Family Resource Center added needed additional hours of staff time. The Salvation Army initiated purchase of a suitable property for the transitional housing program, and the Children's Home Society implemented a training and support program for child care providers.
- In addition to the implementation of the 2000 Plan, the Commission also allocated and released funds which had accrued in the trust since 1999 for a one-time Mini-Grants program, offering awards to child care providers for a variety of enhancements, and offering funds for one-time capital equipment and improvement projects, and additional services. While this strategy was not formally added to the strategic plan for use of the accrued funds in the trust, it was implemented, along with the strategies identified in the strategic plan. Strategy savings accrued during the first year of implementation were used to increase the amount allocated to the family resource center strategies, and by the end of the fiscal year this enabled the Commission to make two awards to the Marysville Joint Unified School District for the purchase of portable buildings to permanently house family resource center

- programs at Cedar Lane and Ella Schools, and a one-time award to GraceSource, Inc. to support a coordinator position for these two sites.
- The Commission also implemented a State Commission Initiative to provide retention incentives to child care providers, which fit well with strategies identified in the 2000 Plan related to improving the quality and quantity of child care spaces available.

### The 2001-2002 Revisions as Implemented in 2002-2003

- All of the strategies and initiatives begun in 2001-02 continued throughout 2002-03. The portables for Cedar Lane and Ella Schools were purchased and opened for use by mid-year, and coordination for the two family resource center sites managed by Grace Source was established. The agency programs mentioned above continued, although continuing delays in the Salvation Army's efforts to purchase and renovate a suitable facility prevented the opening of the proposed program throughout this entire year. Awards were made and many projects were implemented through the One-Time Mini Grants Program, and significant input was received that the mini grants approach was useful, and that the Commission should continue this approach if funds permit in the future.
- There were two major revisions to the original plan made in 2001-02 for implementation in 2002-03. Both literacy promotion and the State Commission School Readiness Initiative were identified as additional strategies to the original plan. Both of these strategies were implemented effective July 1, 2002, when the Commission established contracts with the Yuba County Library to support the operation of a mobile literacy promotion program, known as the Book Buggy, and the Marysville Joint Unified School District to establish Kinder Camp programs and year round outreach to parents of children 0-5 at three target schools, i.e., Cedar Lane, Ella, and Linda, as part of the State Commission's School Readiness Initiative.
- The Commission also continued implementing the remaining strategies in the original 2000 Plan, i.e. establishment of the resource coordination/development function, and the dental health strategy of making funds available to water agencies to fluoridate the county's water systems. The Yuba Community Collaborative for Healthy Children received the award for resource coordination/development and the program began on January 1, 2003. The RFP for water fluoridation projects did not result in any specific proposals, but did open the door for discussion and negotiations with one interested water agency, i.e., Olivehurst Public Utility District.
- The Commission began to implement its Real Property Initiative, another part of the plan for use of accrued funds in the trust which had been approved in the prior year, when approached by Head Start about participating in the establishment of a new facility in Marysville. The Commission made an award in December of 2002.

### The 2002-2003 Revisions as Implemented in 2003-2004

- Most of the strategies and initiatives begun in 2001-02, and continued throughout 2002-03, also continued throughout 2003-04. The One-Time Mini Grants Program ended in April of 2003, and all awards had been made by that time, although payment of several awards was delayed until 2003-04, and implementation time frames were also delayed in a few instances.
- The Salvation Army transitional housing program opened its doors in November of 2003, a few months after the Commission made an additional award from the funds allocated to the Real Property Initiative to assist in completing the renovation. The Olivehurst Public Utility District submitted a proposal and received an award in April of 2004, and the water fluoridation project will go forward now, benefiting many of the citizens of Olivehurst.
- The Commission released an RFP for the amount remaining in the allocation for the Real Property Initiative, and in May of 2004 an award was made to Riverside Restoration to assist in purchasing and cleaning up a property which will be used to provide low income housing for single parents with children 0-5.
- The Commission added a strategy, transportation, and allocated funds to this early in 2002-03. Later in the year however, during the 2002-03 revision process the transportation strategy was incorporated into the other strategies, and when the 2003-04 Plan was approved by the Commission, and the 03-04 operating budget was approved, the transportation strategy was shown on the document, but no funds were allocated to it for 2003-04.
- The Commission began considering participation in the Regional Children's Health Initiative during 2003-04. While a commitment to the principles in the regional charter has been made, and the Commission is actively participating in the planning, no dollar commitment has been made, and no formal application or intent letter has been sent to the State Commission in response to its recently announced State Children's Health Initiative.
- The Commission also began considering participation in the State Commission Preschool for All Initiative early in 2004. The Commission did adopt the criteria as required for full participation, and did seek and receive a planning grant for this purpose, although no commitment of funds, or to participation in a pilot has yet been made. The impact of these discussions will be apparent when reviewing the 2004-2005, since both issues are addressed in the final six broad need areas which are identified.

### 2004-2005 Plan

• Most of the original 2000 Plan strategies will end in 2004-05. The three-year contract commitments for the family resource center strategies end on December 31, 2004, as does the breastfeeding promotion and support contract. The three-year contract for the transitional housing program ends on March 31, 2005. The existing contracts related to improving child care quality and quantity, as well as the State Initiative Child Care Retention Incentives end on June 30, 2005, and the contract related to literacy promotion end on June 30, 2005. The resource coordinator/development contract reaches the two-year point on December 31, 2004,

and if the Commission continues the practice of three-year commitments, this contract will end on December 31, 2005.

- This is a time of transition to new initiatives. This Plan is a complete rewrite of the original 2000 Plan, and the subsequent revisions, using a new approach of providing broad statements of need and general statements about possible strategies to be used in meeting those needs.
- The Commission began considering participation in the Regional Children's Health Initiative during 2003-04. While a commitment to the principles in the regional charter has been made, and the Commission is actively participating in the planning, no dollar commitment has been made, and no formal application or intent letter has been sent to the State Commission in response to its recently announced State Children's Health Initiative. This has not been identified as a strategy in the 2004-05 Plan, but it could be incorporated into one of the new broad need areas.
- The Commission also began considering participation in the State Commission Preschool for All Initiative early in 2004. The Commission did adopt the criteria as required for full participation, and did seek and receive a planning grant for this purpose, no commitment of funds, or to participation in a pilot has yet been made. The impact of these discussions will be apparent when reviewing the 2004-2005, since both issues are addressed in the final six broad need areas which are identified. Again, this has not been identified as a strategy in the 2004-05 Plan, but it could be incorporated into one of the new broad need areas.
- The Commission's Advisory Committee began the review of the Strategic Plan late last summer. In the fall, a subcommittee of the Advisory Committee worked with the Executive Director and representatives of the Yuba Community Collaborative for Healthy Children to design a parent survey to be used to collect input from parents for the YCCFC purposes in revising the strategic plan. The survey was administered to approximately 400 parents at a variety of events and sites during January and February of 2004. Several Advisory Committee members assisted the YCCHC staff in carrying out the survey.
- Several Advisory Committee members also worked in a subcommittee with the Executive Director to plan and carry out a community input meeting, which was held on March 18, 2004. The meeting was facilitated by Commissioner Paul Tupaz, Vice Chair of the Commission, Advisory Committee members served as lead group facilitators, and other members assisted with the input recording and collection. Participants worked in small groups to address major state goals. They identified needs related to the goals. Participants then met in a large group to prioritize the identified needs across all of the broad goals. These results were then integrated by the Commission's Advisory Committee with the results of a community-wide parent survey conducted by the Yuba Community Collaborative for Healthy Children.
- Needs assessment information provided by the Yuba County Children's Council, and the Yuba County Health and Human Services Department's MCAH Division was also integrated into the plan by the Advisory Committee. One result of this process is that the Strategic Plan will now be more oriented to some broader need areas rather than to specific program

strategies as in the past. Another result is that some of the needs were not mentioned at all in the prior strategic plans, or were mentioned but not emphasized when the specific program strategies were selected by the original Commission. Some of the specific program strategies, which have been funded in the past, are not mentioned at all. The input came in a variety of forms. Sometimes broad needs were identified with specific methods proposed for addressing those needs, and sometimes needs alone, or methods alone were proposed or discussed during the input process. The 04-05 Plan seeks to achieve the five state goals by addressing the six broad need areas identified below.

### Six Broad Need Areas

The new six broad need areas, not in priority order, with suggested methods of addressing those needs identified from the input when available, are as follow:

### **Early Care and Education**

The need for universal access to preschool as proposed by the State Commission, i.e., Preschool for All. The need to continue improving the existing early care and education continuum of care for children 0-5, i.e., improving the quality and increasing the quantity of available child care spaces for children 0-5. The need to expand the availability of parent education programs related to the child's readiness for school, i.e., English language classes and literacy programs for parents, and addressing transportation and other access issues.

### **Community Activities**

The need for safe healthy, and accessible family and child-oriented community activities, to be addressed by establishing and supporting recreational, social, educational, developmental activities appropriate for children 0-5 and their families.

### **Health Care**

The need for all children 0-5 to have access to appropriate and timely health care, to be addressed by increasing the availability of health insurance coverage, i.e., improving access which includes transportation to existing medical providers, increasing the availability of specialized medical services not currently offered in the county, improving the level of reimbursement paid to those medical providers accepting publicly funded health insurance coverage, improving outreach and education for parents to promote use of publicly funded health insurance, and appropriate use of the available medical providers, and promoting advocacy among parents and others for an improved system.

### **Early Intervention**

The need for early identification of and intervention for health, developmental, and behavioral problems which impair the child's readiness for school.

### **Outreach and Prevention**

The need for outreach, education and prevention services to assist families with a variety of health related issues, including nutrition practices, prevention of childhood obesity, prevention of childhood injury, prevention of child abuse and neglect, and prevention of pre and perinatal substance abuse.

### **Consistent Services**

The need for consistent family resource center services to be addressed by maintaining and expanding the network of school, clinic, and neighborhood based family resource centers.

Summaries of the input received in the March 18 community input meeting, and from the parent survey administered by the YCCHC, appear as Attachments 1 and 2 to the revised strategic plan. Also, the Yuba County Children's Council Needs Assessment, and the Yuba County Health and Human Services Department Maternal and Child Health Survey Results are shown, respectively, as Attachments 3, and 4.

### **Indicators for Evaluation Use By State Goals**

The YCCFC is participating in the state-wide Proposition 10 Evaluation and Data Collection System or PEDS, fully funded by the California First 5 Commission. The YCCFC has also begun to identify those indicators which will be evaluated for Yuba specific purposes.

The indicators are shown below organized by the broad state goals.

### **Improving Child Health**

- Decrease in infant mortality rate (population based)
- Reduction in number of newborns with low birth weight (participant and population based)
- Increase in number of pregnant women receiving adequate prenatal care (participant and population based)
- Increase in number of children 0-5 current on immunizations (participant and population based)
- Increase in number of children 0-5 receiving timely well baby check ups as scheduled (participant and population based)
- Increase in number of children 0-5 with a regular medical home (participant and population based)
- Increase in the number of children 0-5 with health insurance coverage (participant and population based)
- Increase in the use of breastfeeding (participant and population based)
- Increase in the number of children receiving annual dental exams beginning by age 2 (participant based)
- Increase in the number of children 0-5 with dental insurance (participant and population based)

- Increase in the number of children 0-5 living in smoke free homes (participant based)
- Increase in the number of smoke free pregnancies (participant based)

### **YCCFC Additional Indicators**

• Decrease exposure to alcohol, and other drugs prenatally and during the first five years of the child's life. (participant and population based)

### **Improving Child Development**

- Increase in number of 3 and 4-year old children receiving early care and education experience such as: preschool, Head Start, private preschool, day care, family child care, etc. prior to entering kindergarten. (participant based)
- Increase in the number of children 0-5 who receive developmental screenings. (participant and population based)
- Increase in number of children who receive early identification of special needs and disabilities. (participant and population based)
- Increase in the number of referrals to appropriate services made for children 0-5 identified with special needs. (participant based)
- Increase in the number of children 0-5 participating in school readiness transition programs. (participant and population based)
- Increase in the number of child care spaces in centers for children 0-5. (population based)
- Increase in the number of family child care spaces for children 0-5. (population based)
- Increase in the number of Head Start spaces for children 0-5. (population based)
- Increase in the number of licensed child care spaces for children with disabilities and other special needs. (population based)

### **Strengthening Families**

- Increase in family reading/storytelling. (participant and population based)
- Recurrence rates of child abuse/neglect in families served. (participant and population based)
- Number of children 0-5, and their families living in poverty. (participant and population based)
- Number of children 0-5, and their families living with food insecurity. (participant and population based)
- Number of children 0-5 and their families with stable housing. (participant and population based)
- Status of the mother's educational attainment. (participant and population based)
- Child abuse/neglect rates. (population based)
- Teenage birthrates. (population based)
- Decrease the need for foster care placement. (population based)

### **Improving Systems**

- Increased accessibility of services.
- Improved quality and delivery of services.
- Increased cultural competence in the service delivery system.
- Increased service integration. \*
- Increased accountability for results.
- Increased civic engagement. \*\*
- Improved school readiness system.
- Increased community awareness of Commission programs and activities.
  - \* This includes the promotion of improvements in collaboration between and among providers serving children 0-5, including but not limited to an increase in shared training and cross training opportunities.
  - \*\* This includes the promotion of the broadest possible community input; including input from parents (of children 0-5) to the planning, development, and implementation of Proposition 10 funded programs.
  - \*\* This includes the promotion of parent access to funds to work towards community improvement.

### **Improving School Readiness**

### On the K Profile

- Child in good or excellent health upon kindergarten entry
- Early care and education experiences prior to kindergarten entry
- Scores on Abbreviated Desired Results Developmental Profile
- Parents of entering child received parent education and support services
- Entering children living with single parents versus both parents

### On the School Profile

- School attendance rates
- Kindergarten retention rates
- Second grade reading test scores
- Participation rates in free/reduced breakfast/lunch programs

### From School and Program Surveys

- Elementary schools with linkages to preschools, child care, and community based programs
- Preschools with linkages to schools and community based programs

### Appendix A

The following documents and sources of input were considered by the Advisory Committee during the FY 03-04 revision of the Strategic Plan for 04-05.

- YCCFC March 18, 2004 Community Input Session
- YCCFC Summary of Survey Results and Parent Comment Summaries
- YCCHC Parent Survey Results Executive Summary April 16, 2004
- Yuba County Children's Council Prioritization of Identified Needs/Issues December 2003
- Yuba County MCH Perinatal and Child Health Survey 2004

### YCCFC MARCH 18, 2004 - COMMUNITY INPUT SESSION

### **IMPROVING CHILD HEALTH**

Lack of acknowledged dental care (6 votes)

**Injury prevention** (3 votes)

- (#7) **Perinatal substance abuse** (7 votes)
- (#3) Lack of Insurance/Share of cost (16 votes)

Childhood obesity/Nutrition (1 vote)

**Transportation to appointments** (2 votes)

(#7) Parent education on children's health issues (7 votes)

Things that are helpful: Alta Regional Center

Gas cards

**WIC** 

Availability to healthcare providers

Medi-Cal

### **SCHOOL READINESS**

- (#1) Preschool for all 4 year olds (19 votes)
- (#6) Bilingual support in classroom (8 votes)
- (#2) More ESL/Parenting Hmong (17 votes)

**School nursing support in preschool** (5 votes)

(#4) Early intervention support (12 votes)

(O.T., sensory, speech/language, equipment for environment)

Adequate parking (2 votes)

**Longer program hours for children** (no votes)

### CHILD DEVELOPMENT

**Mommy & Me support groups** (4 votes)

- Facility to meet
- Swimming lessons
- Central activities for groups including child care providers w/children
- Gymboree
- (#5) **Behavioral specialist early intervention** (11 votes)

### (#6) Increase capacity and accessibility of child care (8 votes)

- esp. centers
- start-up funds for licensed providers

### **Updating and providing outdoor equipment for 0-5** (2 votes)

- parks
- child care centers
- accessible pools for 0-5 (less cost)

### Child safety awareness (3 votes)

### More 0-5 materials at library (4 votes)

- board books
- site visits for literature and music

### **Increase/expand PEP (Provider Enhancement Project)**

- Retention
- Assist potential providers in training costs
- Intern program for caregivers

### **STRENGTHENING FAMILIES**

### (#7) Family Resource Centers (7 votes)

**Support – Children with challenging behaviors** (6 votes)

**Transportation – gas cards, etc.** (1 vote)

Parks for all – improve park for young children including special needs (4 votes)

**24 Hour Crisis/Emergency child care** (3 votes)

Positive and educational, healthy family activities (4 votes)

**Rehab programs – substance abuse treatment** (3 votes)

### **Order of Priority**

- 1. **Preschool for all 4 year olds** (19 votes) (School Readiness)
- 2. **More ESL/Parenting Hmong** (17 votes) (School Readiness)
- 3. **Lack of Insurance/Share of cost** (16 votes) (Improving Child Health)
- 4. **Early intervention support** (12 votes) (School Readiness) (O.T., sensory, speech/language, equipment for environment)
- 5. **Behavioral specialist early intervention** (11 votes) (Child Development)
- 6a. **Increase capacity and accessibility of child care** (8 votes) (Child Development)
  - esp. centers
  - start-up funds for licensed providers
- 6b. **Bilingual support in classroom** (8 votes) (School Readiness)
- 7a. **Perinatal substance abuse** (7 votes) (Improving Child Health)
- 7b. **Parent education on children's health issues** (7 votes) (Improving Child Health)
- 7c. **Family Resource Centers** (7 votes)

### Survey for Yuba County Families with Children aged 0-5 years SUMMARY OF SURVEY RESULTS

Your answers to these questions will help the Yuba County Children and Families Commission fund community activities and support for children aged 0-5.

### N = 398: Total number of families with children 0-5 years in their home who completed surveys

Date surveys completed: From 11/15/03 to 2/15/04

### A. Tell us about yourself

- 1. How many children aged 0-5 years are in your home
- 2. Your age: Range from 16 to 60 years old (age of persons completing survey)
- 3. Are You: **n**=**377**

90/24% Currently parenting alone 287/76% Currently parenting with a partner

4. What community do you live in: n=389

**10/2.5** % Arboga **84/21%** Linda (East) 0/0 Smartville 77/19.7% Linda (West) 41/10.5 % Beale Air Force Base 1/.25% Wheatland 8/2% Other \_\_ 4/1 % Camptonville 1/.25% Loma Rica **0/0** Currently homeless

10/2.5 % Challenge/Brownsville 99/25% Marysville 7/2 % Dobbins/Oregon House **43/11%** Olivehurst

3/.5% Living with relatives

5. What is your ethnic origin: n=390

**171/44** % Caucasian 11/3% Black 102/26% Hispanic/Latino **0/0** Pacific Islander 16/4% American Indian 7/2% Asian

**80/20 %** Hmong **3/1%** Other:

6. What is your source of income: (check all that apply) (totals more than 100%) n=386

**219/57** % Employment 25/6% Social Security 4/1 % Retirement/Pension 118/30 % CalWorks/Welfare 37/10 % Active Duty Military 21/5 % Other

### B. **Child Development/School Readiness**

7. In which programs/activities do your children 0-5 currently participate? (totals more than 100%) n=323

**181/56%** Preschool **37/11%** Head Start

25/8% Playgroups 23/7% Library–children's programs

38/12% Church activities 60/18% Family childcare—in home

25/8% Enrichment activities (please describe) \_\_\_

8. What problems, if any, have you encountered in finding or using the above activities/programs? **n=212** See comment summaries

What suggestions do you have for improving programs or activities for children 0-5?
 n=180 See comment summaries

### C. Child Health

10. Do you have a doctor, clinic, or other place you can usually take your children for routine/regular health care?

n=378 Yes = 355/94 % No = 23/6%

11. Who is your child's health insurance provider? (check all that apply)

n=390

16/4% Private paid Insurance43/11% Employer paid insurance42/11% TriCare222/58.7% MediCal/DentiCal43/11% Healthy Families5/1% Other7/2% CCS (CA Children's Services)18/4% My

children have no insurance

12. Does your insurance cover dental care?

n = 371

Yes = 87/77 % No = 52/14% Don't Know = 32/9%

13. Were you (mother) able to get prenatal care during your first 3 months of pregnancy?

n=372 Yes = 333/90% No = 38/10%

If no, why? See Comment Summaries

14. Was help available to you for breastfeeding?

n=354 297/84% Yes 57/16% No

15. What problems, if any, have you encountered in getting health care for your child?

n=219 See Comment Summaries 114/52% none

16. What are some of your ideas for making health care better for your child? n=138 See Comment Summaries

### D. Improved support and services for children and families

17. The following are resources I use when I need help or support for raising my child (ages

0-5): n=363 (check all that apply)

**235/65%** Spouse/Partner **4/1%** Substance abuse recovery programs

169/47% Friend0/0 Casa de Esperanza49/13 % Cal Works212/58% Family member27/7% Parenting classes5/1% Other (specify):

70/19% Church 15/4% Counseling 47/13% Library/Book Buggy

**67/18%** Neighbor **198/54%** WIC **5/1%** None

**101/28%** Teacher/Childcare provider **87/24%** Food Stamps

29/8% Family Resource Center 4/1% No One 4/1% Camptonville 50/14% Cedar Lane School 2/0.5% Challenge

**42/12%** Harmony Health **7/2%** Olivehurst **5/1%** Other

17/5% Yuba County FRC for Special Needs Children 0-5 years

12/3% Family Advocacy at Beale AFB 5/1% None

- 18. In receiving support/services needed for my child 0-5, has transportation been a problem? n=364 54/15% Yes 310/85% No Describe: n=41
- 19. What are your ideas for improving support/services/transportation for parents raising children aged 0-5?

n=95 See Comment Summaries

20. How well do you feel your community supports the health and development needs of children aged 0-5 years?

186/53% Very well – there are lots of opportunities
n=349
142/41% Somewhat – I have to search for them
21/6% Not at all – I can't find activities and support for my child

- 21. What ideas do you have for improving your community/neighborhood? n=134 See Comment Summaries
- 22. If you had access to money or resources, would you be interested in working with others to improve your neighborhood/community?

  177/55% Yes
  19/6% No
  n=324
  89/27% Maybe
  39/12% Don't know
- 23. If you were granted three wishes to assist in raising your children (aged 0-5), what would they be?
  - 1) n=231 See Comment Summaries
  - 2) n=188 See Comment Summaries
  - 3) n=149 See Comment Summaries

Additional comments: n=70

### **Parent Comment Summaries**

Question 8. What <u>problems</u>, if any, have you encountered in finding or using the above <u>activities/programs</u> for your children 0-5 years? (Preschool, Head Start, playgroups, enrichment activities, etc)

### Of the 202 respondents:

71% (143) had *no* problems 29% (59) described the following problems:

- 17 responded that availability was a problem. Responses included; Long waiting lists for Head Start, lack of eligibility due to income, lack of programs in Olivehurst, programs not available for children under 4 years old, and a lack of parks.
- 9 responses concerned program costs and income eligibility issues. Responses included; May not get to stay in preschool can not afford doctors physicals, not available for our income, currently on waiting list, price is expensive, cost of programs with 2 kids same age.
- **9 responses concerned problems with program teachers or staff.** Responses included; teachers are understaffed, some teachers are rude and pick on children, there is not enough help to go around.
- 7 responses concerned a lack of information about program availability.
- 8% (need number) were concerned about health issues. Responses included; lack of resources for special needs children, children seem to get more colds in daycare, poor hygiene and health in other children/manners, children sharing illnesses.
- Remaining responses included; lack of qualified childcare providers, lack of transportation to programs/activities, and inconvenient program/activity times and locations.

# Question 9. What <u>suggestions</u> do you have for improving <u>programs or activities</u> for children 0-5?

### Of the 192 respondents:

46% (90) answered that they had no suggestions 53% (102) had suggestions to improve programs in 2 main categories:

- 44 had suggestions for Programs and Activities.

  Responses included: more after school programs, more activities- general, more activities- younger children, more activities and programs- geographic availability, more sports, more arts, more flexible/available program times/hours, more parent involvement/family activities, more summer programs, more information/outreach on programs and activities, more/bigger facilities, more parks, more bilingual staff.
- **35 had suggestions for Education** in the following areas: more teachers, more schools, more Head Start availability, broaden income requirements for Head Start, more preschools, better education/teachers, more transportation to school/preschool.
- **Remaining categories include;** childcare geographic availability, reduce costs of programs/preschools, healthcare increase availability for the uninsured, and compliments on existing programs.

# Question 13. Were you (mother) able to get <u>prenatal care</u> during your first 3 months of pregnancy?

### Of the 361 respondents:

89% (323) said Yes

10% (37), said No, they were *not* able to get prenatal care during their first 3 months.

### Of those 37 respondents, 19 stated the following reasons:

- 9 said lack of health insurance or lack of physicians who accept Medi-Cal
- 4 said they were unaware of their pregnancy.
- **Remaining responses were:** child was adopted, living with a relative, prenatal care accessed after 3 months, being unaware of programs, and abusive relationship.

# Question 15. What <u>problems</u>, if any, have you encountered in getting <u>health care</u> for your child?

### Of the 105 respondents:

47% had No problems

53% had problems summarized in 5 main categories:

- 23 had problems with insurance
- 16 had problems with doctors
- 9 could not afford health care
- 6 had problems with health care bureaucracy
- 2 had problems with transportation to appointments.

### Question 16. "What are some of your ideas for making health care better for your child?

102 respondents offered the following ideas for improving health care for their children. 11 main categories emerged:

- 19 suggest taking personal responsibility
- 17 want a better medical system/staff
- 12 want better doctors
- 11 want more doctors
- 10 suggest improving information availability
- 9 suggest improving Medi-Cal or insurance coverage
- 6 want a decrease in costs
- 5 say more doctors should accept Medi-Cal
- 5 need insurance
- 5 want more convenience
- 4 want to increase the number of specialists and pediatricians

# Question 18. In receiving support/services needed for my child 0-5, has <u>transportation</u> been a problem?

### Of the 354 respondents:

84% (299) said No.

15%, (54) said Yes. 34 of these described their transportation problems:

- 12 said lack of a vehicle or a broken vehicle.
- 6 said lack of a driver's license.
- 5 said the costs of fuel or bus service
- 4 said supportive service program hours and employment hours presented difficulty in utilizing services
- Remaining responses included; reliance on relatives and on YCOE FRC gas cards for transportation.

### Question 21. "What ideas do you have for improving your community/neighborhood?"

Of the 134 respondents, 88 shared ideas for improving their community/neighborhood:

- 23 expressed interest in increased community involvement or community activities and events. Responses included; we need more community centers for the kids, community and town meetings, get together to make better communication and share ideas as family members to run our community, more community co-ops for moms to share babysitting needs.
- 18 expressed a desire for neighborhood clean-up. Responses included; I think we need to clean it up more, my kids pick up handfuls of garbage on the way to the bus stop, having a clean up day and having zero tolerance for garbage/junk/broken down vehicles in yards, organize clean up group volunteers to help
- 17 stated a need for more, better or safer parks. Responses included; better parks with equipment, more security around parks, parks for disabled children, put in a regulated playground, we need a nice park area that is protected in the evenings from community access so that it is safe for our children without used needles.
- 13 people had ideas which concerned an increase in activities available for children and families. Responses included; more activities for children, more sports for children, more activities in parks, affordable activities and transportation to activities.
- 9 respondents answered with concerns about drugs in their neighborhood.

  Responses included; making this area a drug free zone, clean up the drugs and homeless, crack down harder on drugs and abusive parents, get rid of the drug dealers.
- **8 respondents stated a need for school related improvements**. Responses included; schools should have more after school programs for kids who want to stay in school, after school programs, having more outdoor activities for all school aged children, head start and more doctors, and schools put pressure on families for hygiene, skills, manners.
- **Remaining responses include**; more jobs, more daycare for children 2 and younger, and more information available in Spanish.

# Question 23. If you were granted <u>Three Wishes to assist in raising your children</u> (aged 0-5), what would they be?

Of the 454 individual wishes respondents shared, 11 main categories emerged;

- **18%** (**80**), Education Wish subcategories include: Better teachers/schools (quality) (43); Preschool cost/availability (14); Parent education (9); More teachers/schools (quantity) (8); After school programs (5); Private schools (4); Special education needs (2); College (3); Adult education (2); Communication (2).
- 13% (61), Community Improvement subcategories include: Community involvement (20); Safety (19); Play areas/parks (14); Clean-up/improve environment (10); Drugs/gangs/crime (9); and Other (2).
- 11% (52), Healthcare subcategories include; Quality healthcare (12); General health (11); Quality insurance (9); Affordable insurance (8); Special needs healthcare (7); Affordable healthcare (6); Doctors who accept Medi-Cal (5); Doctors instead of Physician Assistant or Nurse Practitioner (4); More doctors (4);
- 11% (50), Finances subcategories include; Enough resources for subsistence 82% (41), More resources for more fun 36% (18), and Child support enforcement 10% (5).
- **10% (47)**, **Childcare subcategories include**; More childcare (22); Affordable childcare (10); Better quality childcare (6); Free childcare (4).
- 7% (30), Supportive services/Parent education needs; it would be nice to have at least 2 days on base for WIC appointments, coupons for clothes and diapers, more breastfeeding rooms in malls, shops and restaurants, how to deal with hyperactivity, please continue the gas card and phone card programs. What a blessing
- 7% (33), Activities needed; Affordable sports, arts and crafts and music programs, Activities like dance and gymnastics, inside activities for toddlers 1-3 yrs., more interactive play with other parents and children, more organized activities sports, etc for kids under 3, more after school activities
- 5% (22), Time with Child/ren needed; I wish I could afford to work less hours so I could have more time with my son, More time to participate at school with my children, be a stay to home mom and be in their lives more
- 3% (20), Transportation subcategories include; need access to transportation (14) and need a personal vehicle (6).
- 4% (18), Housing needs Have a home of our own, better/safer housing, Not to worry about where we are going to live, to be able to buy a house with a yard for them to play in safely
- 4% (17), Employment needs Assist me in finding a better job so I can better help my children, county needs to improve better jobs and better pay, higher paying job with less hours, stable and steady work.
- 15% (66) Miscellaneous All parents cared about all children, more help and communication from other parents, For my child to have safe, fun and happy childhood, Nice things to dress them in, teach the good example for them, To give whatever I did not have as a child to my child, I'm happy with the way she's being raised, if I could wish for other children, it would be to have parents that are patient, kind and loving, Thank you for all the services you provide

<sup>\*</sup>Percentages within each category based upon total number in each category

### 24 Additional Comments - selected examples

### **Compliments – 18**

I have truly enjoyed the family resource center support and caring

The Yuba County FRC has been a wonderful resource for me.

I am new to the area. I like the 123 grow program because I can stay with my child.

Excellent lactation consultant = Elizabeth w/ Harmony Health

Brenda O. from the Yuba County FRC and Kris and Betty McGregor - Alta Regional have been very supportive and informative and respectable. They treat all their clients with care and professionalism.

My child just started preschool and she loves it so much she never wants to leave and then she comes

home and teaches her sister

Thank you for all your help and support

Thank you for all your help, couldn't have done it without you

Parenting and Community – 12 - I think all people, no matter what color, need to try to understand each other and our struggle to make the world a better and safer place for our children, I love living in east Linda, but it needs to be cleaned up and be less violent, I believe that our community would be more involved together if we could get activities going again at Ponderosa Park. WE have the room at that park to start programs for everyone, because I try to raise my children with as little state help as possible and I cannot afford to put my children in any sport activities, There really should be more children activities in Olivehurst

More programs and activities needed – 7 - We need more programs for our youth especially for summer. There is not fun for them in our community specifically for 0-5 year olds (SAD), 5 year olds with 365 days experience turn 6 and still need supporters, especially if they have special needs. We need these supports to be extended. Our twins turn 6 January 31st., Skills, help, support, after school children need centers and activities. Places to go to for working parents, I realize now it is zero to five but we need to keep kids of all ages off the streets

Outreach - 7 - some type of outreach or something, I look forward for information for what I marked in the front, glad to see a commercial for parent involvement, not just preschool

**Healthcare and Counseling and WIC** -6 - we need a local family psychologist, Commissary carry more of the WIC products, many times they are out of stock of many items, To create a better Health Care System for every family.

**Schools** – **4** - teachers are paying for paper for our kids, dances, pencils, arts and crafts, tutoring have been cut, and summer school is cut, I am thinking about leaving California for a better way of life, it is sad to say, but communities that are more affluent have better chances of attracting good teachers, leaving the rest to make due, It would be nice if there was a preschool closer to Browns Valley

Childcare - 2 - only one daycare center in Wheatland, not very good, I do daycare and find that there are many parents staying home with these children

**Housing** – **4** - I am going to have no home soon 2-1-04, To get the Habitat for Humanities housing in our counties

### **Notes:**

Some responses fit into 2 or more categories, and are counted twice in the specific responses, but are counted only once in the main total for each question.

Percentages within each category are based upon total number within in each category

Answers of none, n/a, don't know, etc have been omitted from calculations of comment percentages.

Margin of error not calculated.

### The Yuba Community Collaborative for Healthy Children Resource Development Coordinator Yuba County Children and Families Commission

## Parent Survey Results Executive Summary

**April 16, 2004** 

In order to assist the YCCFC Commission in revising the Strategic Plan, a two-page "Survey for Yuba County Parents with Children 0-5 years" was developed to get communitywide input from parents on the resources that currently serve them well, the problems they have encountered and what they feel they need to raise their children here in Yuba County. Parents also shared their three wishes to assist them in raising their children, along with specific suggestions on how to improve services and their community.

The development and distribution of the survey was coordinated by The Yuba Community Collaborative for Healthy Children, Resource Development Coordinator for the Commission. A committee of YCCFC Advisory Council members worked with the Collaborative to develop and distribute the survey.

- Distribution dates: November 15, 2003 to February 15, 2004.
- Number of communities represented: 13
- Number of parents with children 0-5 years who completed the surveys: <u>398</u>
- Surveys were printed in Spanish, Hmong and English.
- Major cultural representation of respondents: 44% Caucasian; 26% Hispanic/Latino; 20% Hmong, 4% American Indian; 3% Black.
- Surveys were distributed at Family Resource Centers (one-on-one and at events), at communitywide family activities, via county agencies, and at educational forums.
- Two drawings of \$50 cash were held as incentives for completing the surveys.
- A Summary of parent's written comments, as well as the complete list of individual comments is available from YCCHC and YCCFC (741-1499 and 749-6777).

### **Overview**

When asked to share their "wishes for raising their children," parents expressed three themes that were repeated throughout the survey:

- 1. Preschool and Childcare (\* 97 wishes)
- 2. Community/Neighborhood Activities and Safety (\* 72 wishes)
- 3. Healthcare-related (\* 47 wishes)

### **Highlights**

The following calculations are based on the entire 398 respondents.

### 1. Preschool/Childcare

- 45% (181) attended some type of Preschool.
- 15% (59) had problems finding or using activities/programs for 0-5 years, with "availability and cost" chief concerns.
- Parents gave suggestions: generally, they asked for more geographic locations, more times/hours, more information on availability, and more parks.

### 2. Community

- Parents not only shared concerns about their neighborhood, but expressed an interest in getting involved to improve their neighborhood and community and gave specific ideas for how to do so.
- 44% (177) said that, "given access to money or resources, they would be interested in working with others to improve their neighborhood and community." (22% (89) said Maybe). (Mini-Grants?)
- Parent's suggestions for improving their neighborhood/community, included: more community activities and involvement, neighborhood clean-up, better, safer parks; and clean up drugs. Read the complete list for the many suggestions that parents had.
- In parent's perception, "how well does this community support the health and development needs of children 0-5?"

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47% (186) said "Very well – there are lots of opportunities"
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36% (142) felt "Somewhat – I have to search for opportunities"

6% (23) said "Not at all – I can't find activities and support."

15% (59) had problems finding/using activities and programs (Opportunities for promotion of existing resources?

### 3. Health-related

- 1. 15% (56) had problems getting health care, 6% (23) had problems with insurance.
- 2. 6% (23) didn't have a doctor or place for regular health care. 94% (355) did have a doctor or place (possibly a factor of where surveys were given)
- 3. Only 4% (16) had private insurance; 4% (18) had NO insurance; 56% (222) had MediCal; 11% (43) had Healthy Families Insurance; 11% (42) had TriCare.
- 4. 13% (52) did **not** have Dental in their insurance coverage.
- 5. 10% (38) did **not** have prenatal care during the first trimester (lack of insurance or doctors who accept MediCal).

### 4. Other

- **Transportation**: 14% (54) had transportation problems getting to support/services.
- **Family Resource Centers**: 35% (139) said they used an FRC for help or support in raising their child 0-5 years.

### Yuba County Children's Council

Prioritization of identified needs/issues December 2003

- Enrichment Activities for youth school and community based after school activities.
   20 votes
- 2. Improve/increase drug and alcohol rehabilitation services 10 votes

Intensive Foster care, foster care development, more local foster homes for teens - 10 votes

- 3. Prevention services specifically for youth substance abuse services, groups, support, outreach, Juvenile Drug Court 8 votes
- 4. Inadequate or non existent child care 6 votes
- 5. Support services home visitation and services that enable families to utilize resources in the community 5 votes

Identify & list community resources for needs such as food, clothing, shelter, mental health, drug/alcohol addiction, health care, adult/child abuse/neglect - 5 votes

Services for homeless teens, children and families - 5 votes

- 6. Domestic Violence 4 votes
- 7. Parenting Capacity 3 votes

Support for on going programs to prevent domestic violence, child abuse/neglect, drug/alcohol addicition, water safety, seat belt/car seat safety and truancy programs - 3 votes

8. Services for developmentally delayed clients with mental health and/or substance abuse issues - 2 votes

Prenatal Care in the first trimester - 2 votes

Increase communications/relationships with various cultural groups in Yuba County - 2 votes

Housing - 2 votes

9. Utilize Yuba County Cadets to encourage and support other young people - 1 vote

Teen births - 1 vote

# YUBA COUNTY Maternal Child Health Perinatal and Child Health Survey 2004

### **Brief Summary:**

The MCH Perinatal and Child Health Survey was done December 2003 through February 2004. The MCH program did this survey to assess the perinatal and child health needs in Yuba County. The surveys were taken at the following locations: Peach Tree Clinic, Lindhurst Family Health Center, Wal-Mart (Linda), WIC, private and state Preschools, Fathers First, F.O.R. Families, and at Yuba County Health Department car seat classes.

- 1. Survey: 294 administered
  - 23.1% Hispanic (Note: one-half of the 23.1 % are immigrants from Mexico). 71.1% Non-Hispanic
- 2. **Poverty Level** 40% surveyed average Annual Income \$15,000.00 (4 people) (\$35,300 for 4 people allowable income eligibility). Of those people, 72.7% surveyed are on Medi-Cal or Healthy Families.
- 3. **Pregnancies** (294 surveyed) 96 were present within the last 3 years
- 4. **Prenatal Care** 85% (average time women seek prenatal care is in the 7<sup>th</sup> week of pregnancy, or 2<sup>nd</sup> month)
  - A. 81% of women agreed they sought prenatal care early enough in their pregnancy.
  - B. 23% of women felt that the biggest obstacle for not seeking early prenatal care was "I didn't know I was pregnant" and the second biggest obstacle being they couldn't get an appointment earlier (15.5%).
  - C. 72% surveyed were covered by Medi-Cal during their prenatal care.
  - D. 7% were uninsured and of those 7%, 3% stated that that was an obstacle.
  - E. 76% of the women surveyed were on WIC during their pregnancy.
  - F. 62% took Folic Acid during their pregnancy.15% took Folic Acid before and during their pregnancy.
- 5. **Breastfeeding** 54% breastfed their baby for at least 3 months.
- 6. **Problems with Breastfeeding** The top 2 reasons women had problems with breastfeeding are: 1. "I tried but my baby didn't breastfeed well" and, 2. "I didn't want to breastfeed".
- 7. **Discussions with OB during Prenatal Care Visits** 150 people answered these questions with a positive response of yes.
  - A. Smoking -75%
  - B. Breastfeeding 88%
  - C. Drinking Alcohol 76%

- D. Early Labor 69.5%
- E. Emotional or Physical Abuse 58%
- F. Illegal Substance 69%
- G. Seeing your Dentist 49%

### 8. **Perceptions during Pregnancy** – How important do they feel about the following?

1.	Getting prenatal care (179 answered)	86.5% Very important
2.	Folic Acid – (176 answered)	76% Very important
3.	Limiting Alcohol – (158 answered)	89% Very important
4.	Limiting Smoking – (158 answered)	86% Very important
		7% Not too important
5.	Breastfeeding – (159 answered)	68.5% Very important
		13.8% Not too important
6.	Not Drinking – (159 answered)	90% Very important
		6.9% Not too important
7.	Staying away from Medicine not OK'd by Doct	or (175 answered)
		89.1% Very important
8.	Illegal Drugs – (178 answered)	91.4% Very important
		6.3% Not very important
9.	Eating Healthy – (178 answered)	86.5% Very important
		7.3% Not too important
10.	Prescription Drugs i.e. Vicodan (178 answered)	89% Very important
11.	Staying clean & sober – (175 answered)	90.8% Very important
12.	Avoid 2 <sup>nd</sup> hand smoke – (176 answered)	82.9% Very important
13.	Getting Physical Activity – (174 answered)	75.9% Very important
		16% Some-what important
		6.3% Wasn't important
14.	Past 2 years witness Emotional or Physical Abu	se (204 answered)
	-	30.4% Witnessed
		59.3% Did not witness

### 9. Survey 255 Parent response to questions regarding their children –

but vey 255 I arent response to ques	but vey 255 I arent response to questions regarding their emuren			
Mean age (8 year old child)	540 children were under 18 years of age			
A. Seen a Dentist in the past year?	306 or 64% saw dentist			
B. Have Dental Insurance?	441 or 81% have dental insurance			
C. Have Dental problems?	86 or 15.9% yes			
Behavioral or Emotional problems?	74 or 13.7% yes			

10. Behavioral or Emotional problems? 74 or 13.7% yes
11. Overweight? 45 or 8.33% yes 2% didn't know
12 Drinks Alcohol? 8 or 1.5% yes (according to parent)
13. Smokes cigarettes? 8 or 1.5% kids smoke
14. Illegal drugs? 2 or 0.4%

- 15. Where do you take your child when he/she is sick?
  - A. Private Doctor's office 95 or 32.3%
  - B. Clinic 139 or 47.3%
    - i. Peach Tree Clinic 35 or 11.9%
    - ii. Lindhurst Family Health Center 34 or 11.6%
    - iii. Del Norte Clinic 26 or 7.5%
  - C. Hospital Emergency Room 4 or 1.4%
  - D. Other -4 or 1.4%
- 16. Was there a time when your child needed to go to the doctor but didn't? if yes, Reason: 31.2% Cost too much. 12.5% Transportation

# 17. Parent's Assessment of Community Issues – 255 Surveys – Top 5 Health Issues (Parent's perceptions)

4	T 7 1	i
1	V 10	ence -

i.	Not serious:	15.6%
ii.	Somewhat serious:	15.3%
iii.	Serious:	21.4%

### 2. Teen Pregnancy –

i.	Not serious:	13.6%
ii.	Somewhat serious:	9.5%
iii.	Serious:	27.9%
iv.	Very serious:	39.8%

# 3. Drug/Alcohol Abuse – i Not serious: 11.2%

1.	Tiot scrious.	11.4/0
ii.	Somewhat serious:	14.3%
iii.	Serious:	23.1%
iv.	Very serious:	42.9%

### 4. Homeless Families –

i.	Not serious:	11.2%
ii.	Somewhat serious:	17%
iii.	Serious:	22.4%
iv.	Very serious:	39.8%

### 5. Second hand smoke –

i.	Not serious:	10.2%
ii.	Somewhat serious:	14.3%
iii.	Serious:	23.1%
iv.	Very serious:	42.9%

### 6. Injuries due to accidents –

i.	Not serious:	17.3%
ii.	Somewhat serious:	27.2%
iii.	Serious:	18%
iv.	Very serious:	27.2%

7. Do you currently smoke? 35% identify themselves as smokers.

8. Do you smoke in the home? 15% yes

# 18. **Firearms in the home?** 12.6% yes Are the firearms stored in a locked container? 63.5% yes

### 19. **Disagreements – How handled - 271 Surveys**

1.	Ignore the problem?	Never:	42.8%
		Sometimes:	18%
2.	Discuss problem calmly?	Sometimes:	22.6%
		Usually:	35.8%
		Always:	33.2%
3.	Argue heatedly or shout?	Never:	25.5%
		Rarely:	32.6%
		Sometimes:	31.1%
		Usually:	6.6%
		Always:	2.9%
4.	Threw things or hit?	Never:	78%
		Rarely:	11.8%
		Sometimes:	5.5%
		Usually:	1.5%

### 20. Coping with Parenthood – 279 Surveys

Very well: 53% Not at all: 1%

### 21. Someone you can turn to? 283 Surveys

Yes: 80.5%

No:

22. In the past 2 years, did you witness Child Abuse? 21.9% witnessed child abuse.

# Note: Most percentages don't add up to 100% due to missing or unanswered questions.

Always:

0.7%

#1 mixed = If they marked more than one box and did not specify just one type of race.